





Brighton & Hove
City Council

Overview & Scrutiny Committee

Title:	Overview & Scrutiny Committee
Date:	22 July 2015
Time:	4.00pm
Venue	The Ronuk Hall, Portslade Town Hall
Members:	Councillors: Simson (Chair), Allen, Bennett, Cattell, Deane, Marsh, O'Quinn, Page, Peltzer Dunn and Wares
Contact:	Ross Keatley Democratic Services Manager 01273 291064 ross.keatley@brighton-hove.gov.uk

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	<p style="text-align: center;">FIRE / EMERGENCY EVACUATION PROCEDURE</p> <p>If the fire alarm sounds continuously, or if you are instructed to do so, you must leave the building by the nearest available exit. You will be directed to the nearest exit by council staff. It is vital that you follow their instructions:</p> <ul style="list-style-type: none">• You should proceed calmly; do not run and do not use the lifts;• Do not stop to collect personal belongings;• Once you are outside, please do not wait immediately next to the building, but move some distance away and await further instructions; and• Do not re-enter the building until told that it is safe to do so.

AGENDA

8 PROCEDURAL BUSINESS

- (a) **Declarations of Substitutes:** Where councillors are unable to attend a meeting, a substitute Member from the same political group may attend, speak and vote in their place for that meeting.
- (b) **Declarations of Interest:**
- (a) Disclosable pecuniary interests;
 - (b) Any other interests required to be registered under the local code;
 - (c) Any other general interest as a result of which a decision on the matter might reasonably be regarded as affecting you or a partner more than a majority of other people or businesses in the ward/s affected by the decision.

In each case, you need to declare

- (i) the item on the agenda the interest relates to;
- (ii) the nature of the interest; and
- (iii) whether it is a disclosable pecuniary interest or some other interest.

If unsure, Members should seek advice from the committee lawyer or administrator preferably before the meeting.

- (c) **Exclusion of Press and Public:** To consider whether, in view of the nature of the business to be transacted or the nature of the proceedings, the press and public should be excluded from the meeting when any of the following items are under consideration.

Note: Any item appearing in Part Two of the agenda states in its heading the category under which the information disclosed in the report is exempt from disclosure and therefore not available to the press and public.

A list and description of the exempt categories is available for public inspection at Brighton and Hove Town Halls and on-line in the Constitution at part 7.1.

9 MINUTES

1 - 4

To consider the minutes of the meeting held on the 10th June 2015 (copy attached).

Contact Officer: Mark Wall
Ward Affected: All Wards

Tel: 01273 291006

OVERVIEW & SCRUTINY COMMITTEE

10 CHAIRS COMMUNICATIONS

11 PUBLIC INVOLVEMENT

To consider the following matters raised by members of the public:

- (a) **Petitions:** To receive any petitions presented by members of the public.
- (b) **Written Questions:** To receive any questions submitted by the due date of 12 noon on the 15th July 2015.
- (c) **Deputations:** To receive any deputations submitted by the due date of 12 noon on the 15th July 2015.

12 MEMBER INVOLVEMENT

To consider the following matters raised by Members:

- (d) **Petitions:** To receive any petitions;
- (e) **Written Questions:** To consider any written questions;
- (f) **Letters:** To consider any letters;
- (g) **Notices of Motion:** to consider any Notices of Motion referred from Full Council or submitted directly to the Committee.

13 CO-OPTEE UPDATE

Updates on matters from the non-voting co-optees.

14 EMERGENCY CARE UPDATE- BRIGHTON & SUSSEX UNIVERSITY HOSPITALS TRUST 5 - 22

Presentation by Matthew Kershaw, Chief Executive – Brighton & Sussex University Hospitals Trust (copy attached).

Contact Officer: Kath Vlcek *Tel:* 01273 290450
Ward Affected: All Wards

15 UPDATE ON GP PROVISION IN THE CITY 23 - 32

Presentation from NHS England (copy attached).

Contact Officer: Kath Vlcek *Tel:* 01273 290450
Ward Affected: All Wards

16 OSC WORK PLAN - UPDATE 33 - 38

Wok Plan for July to March 2016 (copy attached).

Ward Affected: All Wards

OVERVIEW & SCRUTINY COMMITTEE

The City Council actively welcomes members of the public and the press to attend its meetings and holds as many of its meetings as possible in public. Provision is also made on the agendas for public questions to committees and details of how questions can be raised can be found on the website and/or on agendas for the meetings.

Agendas and minutes are published on the council's website www.brighton-hove.gov.uk. Agendas are available to view five working days prior to the meeting date.

Meeting papers can be provided, on request, in large print, in Braille, on audio tape or on disc, or translated into any other language as requested.

If you have any queries regarding this, please contact the Officer listed on the agenda.

Date of Publication – Tuesday, 14 July 2015

**BRIGHTON & HOVE CITY COUNCIL
OVERVIEW & SCRUTINY COMMITTEE**

4.00pm 10 JUNE 2015

THE RONUK HALL, PORTSLADE TOWN HALL

MINUTES

Present: Councillors Simson (Chair); Allen, Bennett, Deane, Marsh, O'Quinn, Page, Peltzer Dunn, Penn and Wares.

Non-voting Co-optees: Mr. R. Brown, Healthwatch, Mr. R. Brett – Youth Council, Mr. C. Vincent - Older People's Council.

Also in attendance: Ms. P. Head – SCT, Ms. G. Hoban – CCG, Mr. P. Somerville – SCT.

PART ONE

1 PROCEDURAL BUSINESS

(a) Declarations of Substitutes

1.1 There were no declarations of Substitutes.

(b) Declarations of Interests

1.2 There were no declarations of interests.

(c) Exclusion of the Press and Public

1.3 The Chair noted that there were no items listed in part two of the agenda and proposed that the press and public should be permitted to remain throughout the meeting.

1.4 **RESOLVED:** That the press and public be not excluded from the meeting.

2 MINUTES OF PREVIOUS MEETINGS

2.1 The Committee noted that the minutes of the last meeting of (a) the Overview & Scrutiny Committee meeting held on the 23rd March 2015 and (b) the Health & Wellbeing Overview & Scrutiny Committee meeting held on the 25th March had been agreed by the previous Chairs and were before the committee for information.

2.2 **RESOLVED:** That the minutes of the two meetings be noted.

3 CHAIR'S COMMUNICATIONS

- 3.1 The Chair welcomed everyone to meeting and acknowledged that following the recent elections there were a number of new councillors on the committee and a number who had little knowledge of the health sector, including herself. She was keen to ensure Members had every opportunity to learn and develop their understanding of the health sector and other aspects that now came under the committee's remit. She then invited the Members and co-optees to introduce themselves and give an outline of their knowledge and experience.
- 3.2 Following the introductions, the Chair noted that the Committee would be supported by the Policy Team and Democratic Services and wished to congratulate the previous Scrutiny Team on being highly commended for their work on the seafront scrutiny at the recent Centre of Scrutiny awards.

4 PUBLIC INVOLVEMENT

- 4.1 The Chair noted that no items had been submitted for consideration at the meeting by members of the public.

5 MEMBER INVOLVEMENT

- 5.1 The Chair noted that there were no items for consideration from Members for the current meeting.

6 OVERVIEW & SCRUTINY COMMITTEE (OSC): WAYS OF WORKING

- 6.1 The Head of Policy introduced the report which set out the ways of working for the committee and its' terms of reference. He noted that new working arrangements had been agreed at the last council meeting and that the available resources for scrutiny reviews had been reduced following the budget decisions for 2015/16. However, he hoped that the committee would find an effective approach to its responsibilities and continue the excellent work that had been undertaken.
- 6.2 The Chair thanked the Head of Policy and noted that there would be a need to see how the new ways of working would have an impact on the committee and the resources available e.g. she noted that Policy Panels could be established by the Policy Committees and these would then impact on the number of reviews that could be undertaken at any one time. However, she hoped that a clear work plan could be developed and monitored by the Committee.
- 6.3 The Members of the Committee noted the ways of working and agreed that there would need to be careful monitoring of the work programme and the creation of any Policy Panels with regard to the available resources. It was also noted that the Policy Committees would be expected to scrutinise their areas of responsibility but it was also felt that the Committee should have a degree of overview.

- 6.4 The Head of Policy stated that discussions were taking place with the respective Chairs to determine how matters could be raised for review and taken forward either via Policy Panels or the Overview & Scrutiny Committee.
- 6.5 Mr. Brown noted that previously concerns about the impact of flooding had been raised and now that this came under the committee's remit, queried whether a report could be brought to a future meeting on the matter.
- 6.6 The Chair stated that she would be happy to add the issue to the work plan and discuss with officers the possibility of bringing a report to the next meeting.
- 6.7 The Committee noted that it was also being asked to establish an Urgency Sub-Committee and agreed that Councillors Allen and Page should be the designated Members, along with the Chair.

6.8 **RESOLVED:**

- (1) That the Committee's terms of reference, as set out in Appendix 2 to the report, be noted;
- (2) That the establishment of an Urgency Sub-Committee consisting of the Chair of the Committee and two other Members; Councillors Allen and Page (or those nominated in accordance with the scheme for the allocation of seats for committees, one from each of the other Groups), to exercise its powers in relation to matters of urgency, on which it is necessary to make a decision before the next ordinary meeting of the Committee be approved;
- (3) That the appoint of non-voting co-opted members from the Older People's Council, the Youth Council and Healthwatch, as referred to in para. 7.1 Appendix 2 (terms of reference), to the report be agreed;
- (4) That the current resources and arrangements in place for Overview & Scrutiny be noted; and
- (5) That the draft work plan (Appendix 3) to the report be approved as the basis for the 2015/16 annual OSC work plan.

7 SUSSEX COMMUNITY TRUST (SCT) CARE QUALITY COMMISSION INSPECTION

- 7.1. The Committee received a presentation from Ms. Paula Head, Chief Executive of Sussex Community NHS Trust, which outlined the role and work of the Trust and its recent inspection by the Care Quality Commission (CQC).
- 7.2. Ms. Head welcomed the opportunity to speak to the Committee and stated that the Trust was pleased with the findings of the CQC and was working to improve the one area where it required further action. She believed this would be addressed and noted that without the full engagement of the staff throughout the organisation it would not have had such a good report. She noted that having had such a good report meant that the Trust to continue to work towards achieving Foundation Trust status and would be meeting the Trust Development Agency Board later in the month with the intention to

then be considered for the next stage. Finally she stated that the Trust welcomed new governors and should anyone be interested she would be happy to discuss the opportunity to get involved.

- 7.3. The Chair thanked Ms. Head on behalf of the Committee for her informative presentation and hoped that the Committee could work with the Trust in the future.
- 7.4. **RESOLVED:** That be thanked for her informative presentation and the information be noted.

7A GOODWOOD COURT DOCTORS' SURGERY

- 7.5. The Chair noted that the formal business of the meeting had concluded, however an urgent matter had been brought to her attention and she invited the Chief Operating Officer for the CCG to speak to the Committee.
- 7.6. The Chief Operating Officer informed the Committee that following a review of the practice at Goodwood Court, the CQC and NHS England had applied to Brighton Magistrate Court for a Section 30 Notice to immediately close the practice. The action had not been taken lightly and all agencies were working closely to find alternative provision for the affected patients.
- 7.7. The Executive Director for Adult Services stated that the Leader of the Council had been briefed earlier and the 3 Ward Councillors informed of the situation. The Chair of the Health & Wellbeing Board had also issued a briefing note to all councillors and this would be made available to the members of the Committee.
- 7.8. The Committee noted the information and thanked the officers for the update.
- 7.9. **RESOLVED:** That the information be noted.

The meeting concluded at 6.05am

Signed

Chair

Dated this

day of

2015

Care Quality Commission Visit Report and Action Plan

Overview and Scrutiny
Committee

Matthew Kershaw
Chief Executive
June 2015

Brighton and Sussex
University Hospitals 
NHS Trust

Our vision

To set the standard for great care, by

- Working together
- Adapting, improving and innovating
- Acting with fairness, kindness and compassion

Our approach for the CIH visit

- Be positive and proud about what we do well
- Be open and honest about the things we need to do better
- Be clear about what we are doing about them

What the CQC found

Overall rating

Requires improvement

Are the services at this trust safe?

Requires improvement

Are the services at this trust effective?

Good

Are the services at this trust caring?

Good

Are the services at this trust responsive?

Requires improvement

Are the services at this trust well-led?

Requires improvement

Overview of ratings

1 64 Good

1 25 Requires Improvement

1 1 Inadequate

Our response

- A fair and balanced assessment of where we are
- Reflects back the success and challenges we outlined ahead of the inspection
- Showcases some good and outstanding services
- Realistic about the challenges we still need to overcome

What the CQC said we do well

Open, honest and transparent

“The team felt that the trust was exceptionally open and engaged with the inspection.”

High quality, compassionate care and pride in what we do

“Every service at each location was found to be caring. Staff across the trust described their pride in the services they were delivering.”

Good outcomes including better than expected mortality

“People were receiving care, treatment and support that achieved good outcomes.”

Foundations for Success – particularly values and behaviours

“With one exception, all the staff we talked to about this had been involved directly in this work, knew a colleague who had been, or were aware of the opportunities they had to engage with and influence this work.”

Care for patients with dementia

“Staff had been innovative and creative to provide safe and stimulating environments for people (with dementia.)”

Effective infection control team and good hygiene practices

“The trust had an effective infection control team and we observed good hygiene practices by staff.”

Critical care

“The critical care teams ... were strong, committed and compassionate.”

Challenges the CQC highlighted

The five categories below are a headline summary of all the “must do’s” and are all areas for improvement which we highlighted in our original presentation to the CQC in May 2014

- Unscheduled care and flow, impacting on patient experience in the Emergency Department
- The central booking ‘hub’
- Cultural issues – including race equality
- Staffing
- Environment

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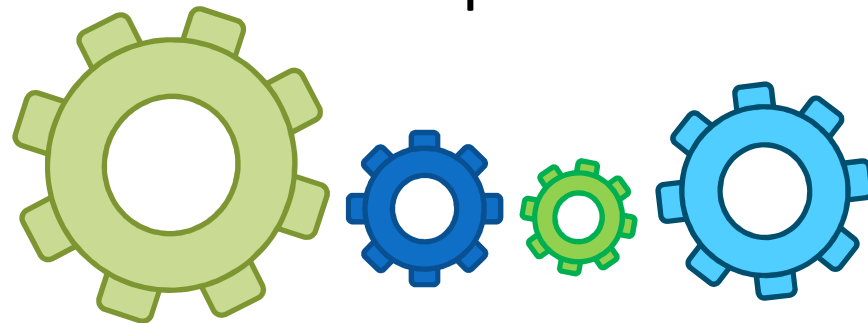
Unscheduled Care

Our Biggest And Most Immediate Challenge

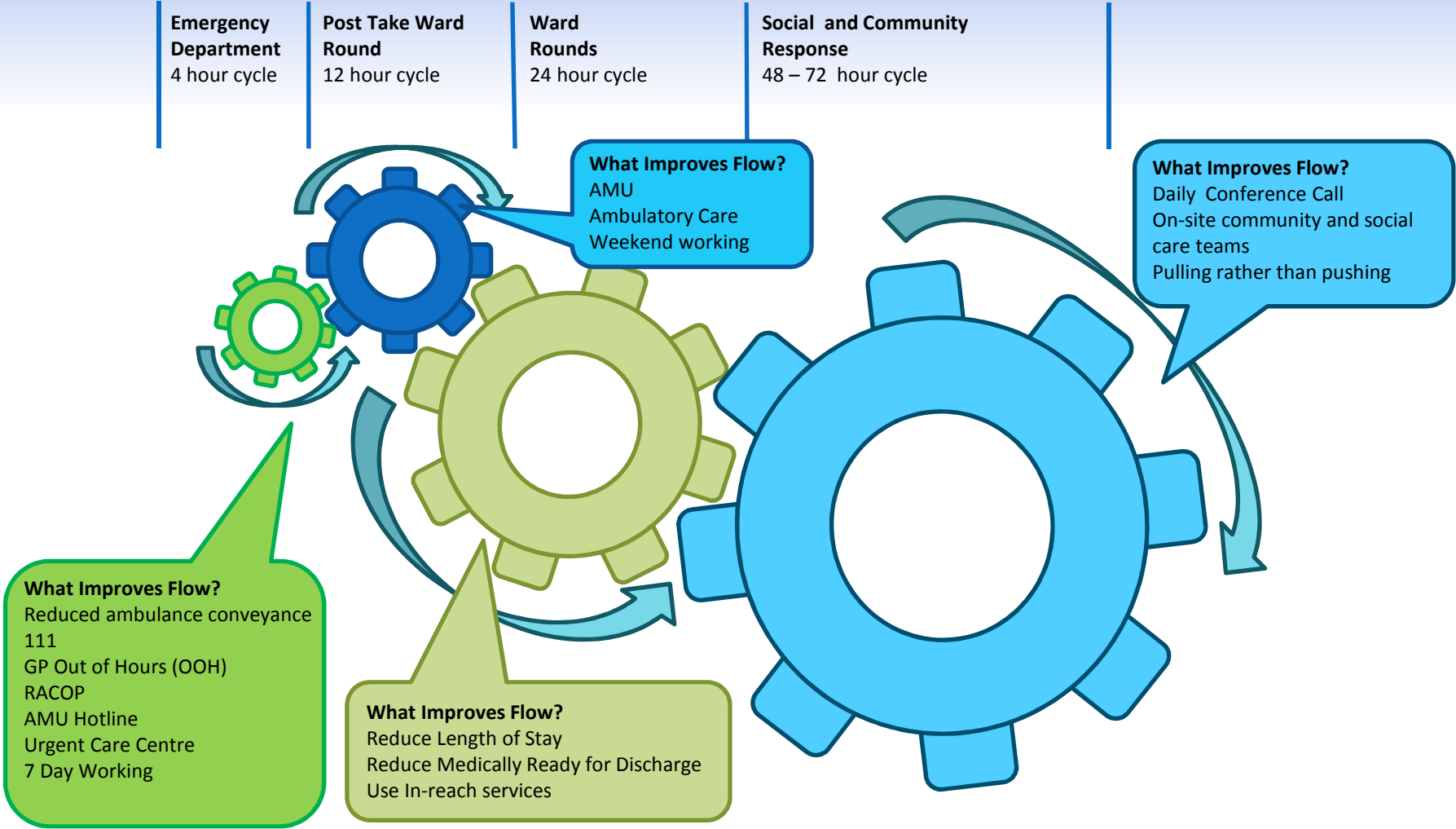
Synchronisation how does hospital working mesh with external partners?

Capacity right beds, at the right time, in the right place

Variability how do we cope with it? How do we stop it?



The Big Machine



Our Biggest And Most Immediate Challenge

Whilst all other elements of the emergency care pathway still need careful monitoring and management, and may at times deliver challenges to performance, by far the most pervasive and persistent reason for failing the four hour standard is the lack of timely access to a bed.

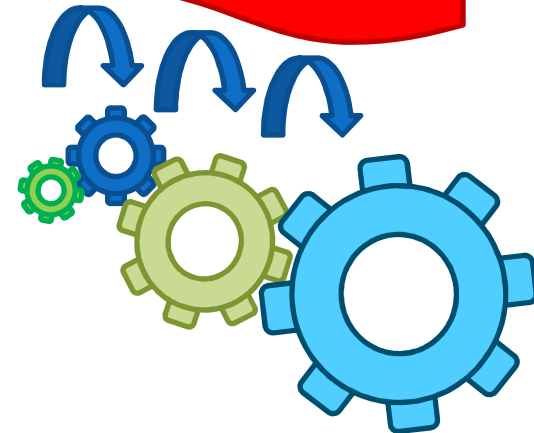
“...A&E performance (operational and clinical), and therefore patient experience, varies significantly between trusts, with a few performing far worse than the rest. Additionally, there are signs that overcrowding of A&E departments is causing a deterioration of performance and impacting negatively on patient experience...” – Keogh Review 2013

There's A Lot More Work To Do...

Increase surgical on-call cover
Newhaven Downs
Hospital at home
Discharge To Assess
7-day services
Cardiology ambulatory service
Clinical leadership
Re-shaping the Acute Floor (AMU, ACU, SAU, RACOP, ED and UCC)

Resolving Delayed Assessments
Resolving multiple agency hand-offs
Capacity and criteria for community beds
Challenging Nursing Home Autonomy
Relative's Expectations
Effectiveness of Pull Services
East/West Sussex/Surrey Split
Staying in gear – speeding up and slowing down

Note:
We're chasing the challenges further down the system...



Central booking 'hub'

Issues identified by the CQC

- Patients were not always receiving timely confirmation of their appointment date
- Clinic capacity not always being used most effectively
- Patients encountering difficulties getting through to the central booking 'hub'
- Internal issues with directorates liaising with the central booking 'hub' if staff were taking leave or there were changes in clinics

Central booking 'hub'

Actions to address the challenges

- Ensure within 5 working days of receipt of referral all patients receive confirmation of their appointment date
 - In May, booked 20,206 appointments which on average are 1,010 patients a day.
- Maximise use of clinic capacity ensuring patients assigned to the right clinic first time through partial booking, triage efficiency and ensuring that the right letter with the right details reaches the patient.
 - Telephone patients if booked less than working days
 - Text reminders
- Ensuring that calls are answered within one minute.
 - In May the booking team received an average of 981 calls a day with 93.4% being answered within an average pick up time of 33 Seconds.
- Working with the clinical directorates to minimise clinics cancelled with less than 6 weeks' notice
 - A 'look forward' report is sent weekly to directorates to review their clinic schedules.
 - Clinical Lead for the booking hub

Cultural issues

Actions to address the challenges

Through “*Foundations for Success*” we are engaging the workforce to address long-standing issues. The programme includes values and behaviours, clinical structure, clinical strategy and performance management. Has been running since August 2013 and now into implementation.

- Values and Behaviours programme (i) developing individuals & teams, (ii) aligning our people processes with V&Bs, and (iii) engaging for improvement.
 - Working group and sounding board/wider staff engagement process
 - internal coaches (13 staff internally appointed part time as coaches)
 - V&B champions (177 signed up)
- Values and Behaviours blueprint
- Leading the Way leadership development programme for 67 senior leaders in the trust
- Clinical structure revised to remove a layer of middle management and give those closest to the services more responsibility and authority (Sept 2014)
- Focus on increased communication, engagement, training and appraisal has started – positive initial feedback but more to do

Cultural issues

Actions to address the challenges

Race Equality

- Discrete Race Equality Workforce Engagement Strategy has been launched as a partnership between the Trust and the BME network
- Work streams
 - Nursing and midwifery
 - Medical
 - Non nursing
 - Administrative
 - Estates and Facilities
 - Procurement
 - HR processes
- Co chaired by the Chief Executive and the Associate Director of Transformation

Staffing

Issues identified by the CQC

- Ensuring there are enough qualified, skilled staff to meet the needs of the patients
- Ensure that staff receive an annual appraisal
- Ensure that staff are supported to receive mandatory training
- Continues to be a challenge and key priority

Staffing

Actions to address the challenges

- £3 million investment in nursing including increased nurse to patient ratios and supernumerary Ward Sisters/Charge Nurses
- Nurse to patient ratios
- Improvements to efficiency of recruitment processes –
 - successful recruitment of 240 trained staff internationally, to start between now and July 15
- Revised bank rates for nursing staff
- Local recruitment campaigns
- Participation in the national programme for nurses return to practice
- Review of appraisal systems
- Access to mandatory training
 - e learning

Environment

Issues identified by the CQC

- Fabric of the building – in particular the Barry building
- Storage
- Clutter
- Soft Facilities Management

Environment

Actions to address the challenges

- 3Ts redevelopment of Royal Sussex County Hospital
- Ahead of this a capital investment programme to maintain existing estate/facilities to the highest possible standards and improve where necessary including, for example, works to support service reconfiguration and refurbishment of PRH discharge lounge
- ‘Dump the Junk’
- PLACE – Sussex Eye Hospital
 - Wayfinding Patient environment – Lighting, redecoration
 - Replacement of windows, roof repairs
- Appointment of Clinical Director of Facilities
- Contract with Sodexo has ended by mutual agreement and developing in house team to manage the programme

In conclusion

A year on from the visit, we continue on our journey of improvement which we and our partners are committed in improving the quality and experience of patients in our care .

- We continue to work with the clinical directorates in making progress with the actions
- We work with our partners in relation to the areas we cannot deliver in isolation, particularly around unscheduled care, patient flow and the impact this can have on the experience of patients who use our Emergency Departments
- We continue with the monthly quality visits to review progress, opportunity to share good practice and share lessons. Identify any new areas where we may need to improve
- We meet regularly with the CQC to review progress against the action plan
- Meet with the TDA monthly and provide an assurance briefing to share progress
- Follow up announced visit and unannounced visit

Goodwood Court Surgery Closure

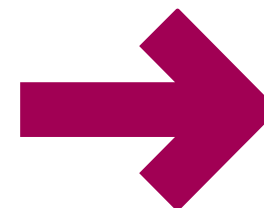
Kirsty Sibandze, Contract Manager

July 2015



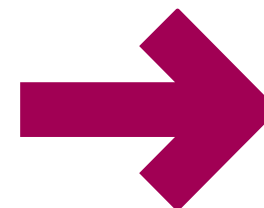
Role of NHS England

- Responsible for commissioning GP services and ensuring that local patients have access to this care
- Holds contracts with over 602 GP practices across the South East (covering the Surrey and Sussex and Kent and Medway areas)
- 50 GP practices across Brighton and Hove



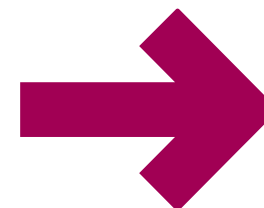
Role of Care Quality Commission

- The CQC is the independent regulator of health and adult social care in England (including GP services)
- Aims to make sure health and social care services provide safe, effective, compassionate, high-quality care and encourages them to improve
- The CQC monitors, inspects and regulates services to make sure they meet fundamental standards of quality and safety



Background

- Goodwood Court Surgery was a two partner GP practice located in Hove.
- The practice had a total of 9,410 patients on it's practice list at 1 April 2015.
- Ongoing partnership dispute resulted in one of the GP partners being unable to work from the practice.
- NHS England, NHS Brighton and Hove Clinical Commissioning Group (CCG) and the Care Quality Commission (CQC) shared concerns that the practice was failing to provide essential services to its patients.



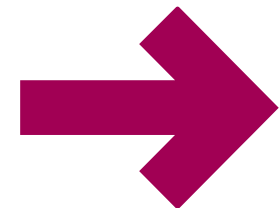
CQC action

- The CQC subsequently inspected the practice on 4 and 8 June 2015. The full report of the outcome of these visits has not yet been made available to NHS England.
- However the service was assessed as potentially representing a risk to patients, meaning that unprecedented and urgent action was taken by the CQC to protect their safety and welfare.
- The CQC confirmed it was their intention to seek removal of the practice's CQC registration. The case was heard on 9 June 2015 at Brighton Magistrates Court, which approved removal of the practice's CQC registration with immediate effect.
- This meant the Goodwood Court practice could not provide clinical care to patients from this point



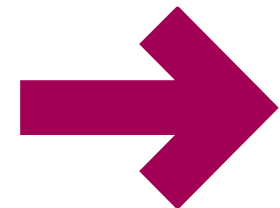
NHS England action

- Following removal of the CQC registration NHS England needed to find alternative care for 9,410 patients
- In the immediate period NHS England initiated additional clinical sessions at the walk-in centre based at Brighton Station Health Centre, to provide support to patients requiring an appointment
- Patients were also advised to call the 111 service for any urgent, but non-life threatening, care needs
- We worked with other local GP practices to ensure patients could also receive 'immediate and necessary' treatment from them where possible
- Employed locum cover to process outstanding repeat prescription requests and to review pathology results
- Liaised with other local healthcare providers to give an update on the situation, support and advice.



Longer-term access for patients

- A mini-procurement exercise was urgently conducted to find a local GP practice which could hold a temporary contract to provide services to patients, in order to guarantee their ongoing access to care
- A temporary contract was agreed and started on 19 June 2015 with Charter Medical Practice, a short walk from the Goodwood Court surgery
- The contract will initially run until March 2016.
- NHS England will undertake a process of engagement with patients and stakeholders to help determine our longer-term commissioning arrangements.



Charter Medical Centre services

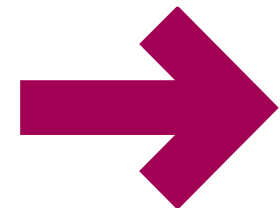


- The practice will have the additional resources it needs to ensure a good quality service for both its new and existing patients.
- Following the immediate action to safeguard care, the practice has been working to organise services in the way they feel will best meet patient needs. To date they have:

Employed the majority of Goodwood Court staff, alongside additional clinical staff

Implemented additional clinics, including extra surgeries outside core opening hours

Established a dedicated reception area for Goodwood Court patients.



Important points

- The CQC action was initiated by the regulator and was independent of NHS England (but we shared concerns about the need to ensure patient safety)
- The responsibility to ensure patients had ongoing access to GP services was NHS England's.
- Due to changes in national regulations NHS England is unable to provide services directly to patients on behalf of a contract holder. The only option available was therefore to instigate a new temporary contract for the provision of services while longer term arrangements are made.
- NHS England will continue to monitor the situation and will update colleagues and patients on longer term plans for the delivery of services in due course.





Overview & Scrutiny Committee Work Plan Edition 02

This is the Overview & Scrutiny Committee Work Plan for the year 2015/16
It will be updated and circulated on a monthly basis to officers and will be used to set agenda items for the forthcoming meetings.

CONTACT:

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Published 14.07.15

For further detailed information regarding specific issues to be considered by the Committee please contact the named contact officer for the item concerned.

Ref	Report Details	Lead Director	Consultation	Lead Officer
09 SEPTEMBER 2015 MEETING				
48449	Flood Risk Management Plans <i>All Committee Decisions</i> <i>Wards affected: All Wards</i>	Report of: Executive Director for Environment, Development & Housing		Report Author: Robin Humphries Tel: 29-1313
48416	Alcohol Scrutiny Panel Monitoring <i>All Committee Decisions</i> First monitoring report <i>Wards affected: All Wards</i>	Report of: Executive Director for Environment, Development & Housing		Report Author: Jean Cranford Tel: 29-2550, Tim Nichols Tel: 29-2163
48387	Homelessness Scrutiny Panel Monitoring Report <i>All Committee Decisions</i> This is the first monitoring report for the homelessness scrutiny panel report <i>Wards affected: All Wards</i>	Report of: Executive Director for Environment, Development & Housing		Report Author: James Crane Tel: 293316
48380	Bullying in Schools Scrutiny Panel Monitoring <i>All Committee Decisions</i> First monitoring update to scrutiny committee <i>Wards affected: All Wards</i>	Report of: Executive Director for Children's Services		Report Author: Sam Beal

For further detailed information regarding specific issues to be considered by the Committee please contact the named contact officer for the item concerned.

Ref	Report Details	Lead Director	Consultation	Lead Officer
25 NOVEMBER 2015 MEETING				
48425	<p>Traveller Strategy Scrutiny Panel Monitoring Report <i>All Committee Decisions</i> Third monitoring report</p> <p><i>Wards affected: All Wards</i></p>	Report of: Executive Director for Environment, Development & Housing		Report Author: Andy Staniford Tel: 29-3159
48423	<p>Seafront Infrastructure Scrutiny Panel Monitoring Report <i>All Committee Decisions</i> First monitoring report</p> <p><i>Wards affected: All Wards</i></p>	Report of: Executive Director for Environment, Development & Housing		Report Author: Geoff Raw Tel: 29-7329, Nick Hibberd Tel: 01273 293756
48421	<p>Adults with Autism Scrutiny Panel Monitoring <i>All Committee Decisions</i> Third monitoring report</p> <p><i>Wards affected: All Wards</i></p>	Report of: Executive Director for Adult Services		Report Author: Anne Hagan Tel: 01273 296370
48418	<p>Trans Equalities Scrutiny Panel Monitoring <i>All Committee Decisions</i> Third monitoring report</p> <p><i>Wards affected: All Wards</i></p>	Report of: Executive Director for Finance & Resources		Report Author: Emma McDermott Tel: 01273 29-6805

For further detailed information regarding specific issues to be considered by the Committee please contact the named contact officer for the item concerned.

Ref	Report Details	Lead Director	Consultation	Lead Officer
03 FEBRUARY 2016 MEETING				
48431	Public Toilets Scrutiny Panel Monitoring Report <i>All Committee Decisions</i> Second monitoring report <i>Wards affected: All Wards</i>	Report of: Executive Director for Environment, Development & Housing		Report Author: Jan Jonker Tel: 29-4722
48429	Short Term Holiday Lets Panel Monitoring <i>All Committee Decisions</i> First monitoring report <i>Wards affected: All Wards</i>	Report of: Executive Director for Environment, Development & Housing		Report Author: Tim Nichols Tel: 29-2163
48427	Children with Autism Scrutiny Panel Monitoring <i>All Committee Decisions</i> First monitoring report <i>Wards affected: All Wards</i>	Report of: Executive Director for Children's Services		Report Author: Regan Delf Tel: 01273 293504
23 MARCH 2016 MEETING				
48435	Social Value Scrutiny Panel Monitoring <i>All Committee Decisions</i> First monitoring report <i>Wards affected: All Wards</i>	Report of: Executive Director for Finance & Resources		Report Author: Cliff Youngman Tel: 01273 291408, Andy Witham Tel: 01273 291498

For further detailed information regarding specific issues to be considered by the Committee please contact the named contact officer for the item concerned.

Ref	Report Details	Lead Director	Consultation	Lead Officer
48433	<p>Private Sector Housing Scrutiny Panel Monitoring <i>All Committee Decisions</i> First monitoring report</p> <p><i>Wards affected: All Wards</i></p>	Report of: Executive Director for Environment, Development & Housing		Report Author: Martin Reid Tel: 01273 93321

For further detailed information regarding specific issues to be considered by the Committee please contact the named contact officer for the item concerned.

